

CALL 1-800-222-1811 FOR PICKUP OR TRACKING OF ALL YOUR PACKAGES



UNITED STATES POSTAL SERVICE®



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0004621347  
MAILED FROM ZIP

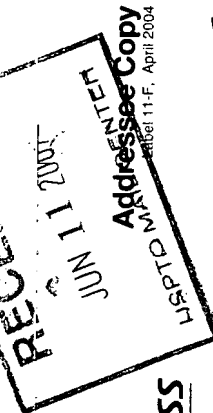


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UNITED STATES POSTAL SERVICE®  
Post Office To Addressee

ORIGIN (POSTAL SERVICE USE ONLY)				DELIVERY (POSTAL USE ONLY)			
PO ZIP Code	Day of Delivery <input type="checkbox"/> Next <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd Day			Time	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	
Date Accepted	Scheduled Date of Delivery			Mo. Day	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Mo. Day Year	Month			Mo. Day	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Time Accepted <input type="checkbox"/> AM <input type="checkbox"/> PM	Scheduled Time of Delivery			Mo. Day	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
Fat Rate <input type="checkbox"/> or Weight	COD Fee			EXPRESS MAIL LABEL DATE-IN			
lbs. ozs.	Total Postage & Fees			NO DELIVERY <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday			
Acceptance Emp. Initials				WARRANT OF SIGNATURE (Domestic Mail Only) Additional merchandise insurance is required for delivery to be made without obtaining signature of addressee or addressee's agent (if delivery address is outside the United States) and I authorize that delivery employee's signature constitutes valid proof of delivery.			

CUSTOMER USE ONLY	
FROM: (PLEASE PRINT)	TO: (PLEASE PRINT)
PHONE ( )	PHONE ( )
how many all box.	
iv only	

FOR PICKUP OR TRACKING: Visit [www.usps.com](http://www.usps.com) or Call 1-800-222-1811

